PART B - FEE(S) TRANSMITTAL

C	Complete and send t	this form, together wi	ee(s), to: <u>Mai</u> or Fax	Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885					
īN	ISTRUCTIONS: This fo	rm should be used for tran	smitting the ISSU	E FEE and PILE	RI ICATION FEE	(if required). Blocks I through 5 :	should be completed where	
ip n	propriate. All further con dicated unless corrected aintenance fee notification	rrespondence including the below or directed otherwise	ratent, advance or in Block 1, by (a	specifying a ne	tion of maintenal	e address; and	d/or (b) indicating a sep	correspondence address as arate "FEE ADDRESS" for	
· <u></u>	CURRENT CORRESPONDENCE 7 Donald W. Meek	CE ADDRESS (Note: Use Block 1 for 590 07/07/2005	any change of address)	2 3 2005 g	Fee(s) Trans papers. Each have its own	mittal. This control additional partificate of	ertificate cannot be used uper, such as an assignm mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must smission	
	Patent Agent 924 East Ocean Front #E			RADEMARK	States Postal addressed to	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
Newport Beach, CA 92661 //26/2005 SSITHIB2 00000051 10782081				RADENT	-				
		MAA21 10/85/81		1	7	iru S.	Cause 1.	(Signature)	
	C:2501 C:1504	700.00 OP 300.00 OP			7	SE-PT-	21, 2005	(Date)	
Ľ	APPLICATION NO.	OLICATION NO. FILING DATE		FIRST NAMED INVENTOR		A	TORNEY DOCKET NO.	CONFIRMATION NO.	
Ţ	10/782,081 TLE OF INVENTION: S	02/19/2004 AFETY HOLD DOWN DE	VICE AND HITCH	James G. Caus	•	PLING PREV	ENTION	4765	
	APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION	FEE	TOTAL FEE(S) DUE	DATE DUE	
j	nonprovisional	YES	\$700	_	\$300		\$1000	10/07/2005	
	EXAN	EXAMINER		IT	CLASS-SUBCLA	ASS-SUBCLASS			
	LUM VANNUCCI, LEE SIN YEE 361			280-511000					
	CR 1.363). Change of correspond Address form PTO/SB/1 Fee Address" indication PTO/SB/47; Rev 03-02 Number is required.	dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us	Correspondence ation form e of a Customer	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3.	PLEASE NOTE: Unless	RESIDENCE DATA TO B	elow, no assignee	data will appear	on the patent. If	an assignee i	s identified below, the	document has been filed for	
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) 4612 CARUM CIRCLE (A) VALE PARK, GA. 3163C Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government									
	4b. Payment of Fee(s): Solution Fee (No small entity discount permitted) 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.								
Advance Order - # of Copies								credit any overpayment, to copy of this form).	
5.	_ ` '	(from status indicated above MALL ENTITY status. See	•	b. Applicant	is no longer claim	ing SMALL I	ENTITY status. See 37 (CFR 1.27(g)(2).	
NC	OTE: The Issue Fee and P	is requested to apply the Issue	will not be accepted	l from anyone oth	or to re-apply any ner than the applic	previously pa ant; a register	id issue fee to the applic ed attorney or agent; or	ation identified above. he assignee or other party in	
ν.	Authorized Signature	Jann D.	Caury	<i>f</i>	Da	ite) 5	EPT 21,	2005	
	Typed or printed name _	JAMES G.	CAUSEY	ρ.	Re	egistration No	NA	·	
sul hi o lo	omitting the completed aps form and/or suggestions x 1450, Alexandria, Virgexandria, Virginia 22313-	pplication form to the USPT s for reducing this burden, sl inia 22313-1450. DO NOT	O. Time will vary nould be sent to the SEND FEES OR C	depending upon Chief Informatic COMPLETED FO	the individual cas on Officer, U.S. F DRMS TO THIS	se. Any commater And Tra	ents on the amount of t demark Office, U.S. Dep END TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450, I number.	